

Chapter 538
School-Based Health Services

Appendix 538C

Speech Therapy Billing Form

Service Record – Speech Therapy

Medicaid Number		Last Name				First Name			
WVEIS Number		Speech Therapist				School/County			
# 92507 Dates of Service/units	# 92508 Dates of Service/units	# 92521 Date of Service	# 92522 Date of Service	# 92523 Date of Service	# 92524 Date of Service	#92567 Date of Service	#92570 Date of Service	#92592 Date of Service	#92593 Date of Service

Speech Therapy Services: Physician’s authorization on file. Must be identified on Service Plan.

Code	Procedure	Service Unit
92507	Treatment of speech language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); Individual therapy session	8 units per month at 15 minutes per unit
92508	Treatment of speech language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation); Group, two or more individuals	8 units per month at 15 minutes per unit
92521	Evaluation of speech fluency (e.g., stuttering, cluttering)	1 per calendar year
92522	Evaluation of speech sound production (e.g., articulation, phonological process, apraxia, dysarthria)	1 per calendar year
92523	Evaluation of speech production (e.g., articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (e.g., receptive and expressive language)	1 per calendar year
92524	Behavioral and qualitative analysis of voice and resonance	1 per calendar year
92567	Tympanometry (impedance testing)	1 per calendar year
92570	Acoustic Immitance Testing	4 per calendar year
92592	Hearing Aid Check - Monaural	1 time per month
92593	Hearing Aid Check-Binaural	1 time per month

Note: 92522 and 92523 may not be billed together on the same day. A speech sound production evaluation (92522) is already included as a part of 92523 (speech sound production evaluation with language evaluation).

Check dates for specialized transportation (vehicle).

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
Transportation Vehicle																																	

Check dates for specialized transportation (aide).

Date	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
Transportation Aide																																	

Signature

Date